Governor's 2007 Management Scorecard Evaluation Criteria

Approved December 27, 2006

_	nan Resource nagement	Below Expectations	Progress Toward Expectations	Meets Expectations
HR 1	EMPLOYEE ATTRACTION & RETENTION: Attracts and retains qualified workforce by strategically using existing human resource management flexibilities, pay practices, and benefits. Hiring and retaining the most qualified candidate for the job is the objective. Data source: Hiring Report, Pay Practices Report, Applicant Flow Report, Turnover Report, Employee Surveys Note: The clock in calculating "time to hire" ends on the position filled date. Positions in continuous recruitment or open until filled are not counted.	Positions in active recruitment remain vacant an average of more than 65 days after being posted. Agency does not monitor, analyze and report turnover, conduct exit interviews or utilize recruiting and retention tools.	Positions in active recruitment remain vacant an average of from 50 to 65 days after being posted. Agency occasionally monitors, analyzes and reports turnover, conducts exit interviews or utilizes recruiting and retention tools.	Positions in active recruitment remain vacant less than an average of 50 days after being posted. Agency regularly monitors, analyzes and reports turnover, conducts exit interviews or utilizes recruiting and retention tools.
HR 2	FAIRNESS & DIVERSITY: Applies management policies and practices fairly and consistently. Champions equal employment opportunity and inclusion by prohibiting discrimination. Monitors and utilizes data and analytics of HuRMan system, and related software tools, to assist in decision-making and addressing deficiencies. Data source: HuRMan, EEO Assessment Report, Employee Dispute	Actions are not taken to address inconsistent application of policy or EEO issues. 78% or fewer grievances upheld for management. Does not monitor and utilize HuRMan and related software tools.	Actions are being implemented to address inconsistent application of policy and EEO issues. Between 79% and 89% of grievances upheld for management. Monitors and utilizes HuRMan and related software tools.	Workforce is diverse. Policies are consistently applied and there are rarely EEO issues. 90% or more grievances upheld for management. Monitors and utilizes HuRMan and related software tools to assist with decision-making and is fully

	Resolution Report, related tools			compliant with state and federal laws.
HR 3	PERFORMANCE MANAGEMENT: Differentiates among levels of performance. Excellence is rewarded, and mediocre or poor performance carries consequences. Data source: Employee Performance Evaluation Report, Agency Salary Administration Plan	Less than 75% of employees receive performance evaluations on time.	Between 75% and 99% of employees receive performance evaluations on time.	100% of employees receive performance evaluations on time. Extraordinary Contributors are recognized.
HR 4	TRAINING & DEVELOPMENT: Invests in the training of the workforce to ensure that employees have the appropriate skill sets. Develops employees to meet the current and future needs of the organization. Understands the importance of, and proactively manages, succession planning through agency training & development activities. Data source: Training Report, Employee Training Evaluations	Employees have generally not been trained and generally do not have the necessary skills to do the job. No succession plan.	Some employees have received appropriate training and have the necessary skills to do the job. Succession plan being formulated.	All employees have received appropriate training and have the necessary skills to do the job. Has in place a succession plan and an established process for monitoring its status and providing updates.
HR 5	HEALTH & SAFETY: Promotes a healthy workforce and provides a safe work environment minimizing potential hazards. Data source: Workers' Compensation Reports; Healthy Virginians Report	Workplace hazards are not addressed. Workforce receives no safety training. Safety programs are not in place. Less than 50% participation rate in Healthy Virginians.	Addresses workplace hazards as they occur. Workforce receives minimal safety training. Safety programs are out-of-date. Between 50% and 74% participation rate in Healthy Virginians.	Potential hazards have been identified and corrected. Loss data is analyzed. Safety training is provided. Safety programs are up-to- date. 75% or more participation rate in Healthy Virginians.
Gov	ernment Procurement	Below	Progress	Meets

		Expectations	Toward	Expectations
			Expectations	
GP 1	eVA USAGE: Conducts procurements using advanced technology by: 1) completing all applicable agency purchases through the eVA portal, 2) posting notices of business opportunities on the eVA website, and 3) making purchases from vendors and suppliers who are registered in eVA. Data source: DGS and DOA Management Reports	1) Less than 75% of agency procurements are processed through eVA. 2) Less than 75% of agency purchases are with registered eVA vendors and suppliers.	1) At least 75%, but less than 95% of agency procurements are processed through eVA. 2) At least 75%, but less than 95% of agency purchases are made with registered vendors and suppliers.	1)At least 95% of agency procurements are made through eVA.2) At least 95% of agency purchases are made with registered vendors and suppliers.
GP 2	VIRGINA PARTNERS IN PROCUREMENT CONTRACT USAGE: Purchases are made from VaPP contracts when such a contract is available and no alternative quality, reasonably priced SWAM vendor or supplier is available. Data source: DGS Management Reports	Less than 50% of eligible VaPP purchases are made from VaPP contracts.	At least 50%, but less than 75% of eligible VaPP purchase dollars are from VaPP contracts.	At least 75% of eligible VaPP purchase dollars are from VaPP contracts.
GP 3	SMALL, WOMEN, & MINORITY VENDOR PARTICIPATION: Exemplifies commitment to using Small, Women, and Minority (SWaM) vendors by (1) achieving SWaM purchasing goals identified in agency's SWaM Plan; (2) implementing the non-goal elements of the agency's SWaM Plan; (3) executing (the governor's) directives in Executive Order No. 33 (2006); and (4) timely submission of the annual agency SWaM Plan, SWaM Quarterly Expenditure Report, and Weekly SWaM Reports. Data source: DMBE SWaM Quarterly Reports;	No actions to increase SWAM contracts; no outreach to SWAM vendors or potential SWAM vendors. SWAM goals missed by more than 10%.	Acceptable progress and/or effort made towards enhancing SWaM business participation in agency procurement and increasing contracts awarded to SWaM suppliers. Within 6% to 9% of meeting SWaM goals.	Significant progress and/or efforts made to enhance SWaM business participation in agency procurement and increasing contracts awarded to SWaM suppliers. Within 5% or less of meeting SWaM goals.

	Secretary's Weekly SWaM Reports			
Fina	ncial Management	Below Expectations	Progress Toward Expectations	Meets Expectations
FM 1	BUDGET PLAN: Establishes financial plan to monitor expenditures to ensure that they stay within appropriations. Also ensures expenditures are made in accordance with the Appropriation Act and any other requirements that the Governor may add. Data Source: CARS and PROBUD.	Agency fails to establish a financial plan for the fiscal year or institute a formal mechanism to monitor expenditures versus budget on a monthly or quarterly basis. Expenditures exceed appropriations and agency does not meet requirements established by the Governor.	Agency establishes a financial plan for the fiscal year, institutes a formal mechanism to monitor expenditures versus budget on a monthly or quarterly basis.	Agency establishes a financial plan for the fiscal year, institutes a formal mechanism to monitor expenditures versus budget on a monthly or quarterly basis, fully meets other requirements established by the Appropriation Act and Governor.
FM 2	INTERNAL CONTROLS: Complies with all state laws and regulations, ensures that agency internal control framework and procedures safeguard against the loss or inefficient use of Commonwealth assets, and records financial transactions properly in CARS. Data Source: Report on Audit for the Year Ended (APA Report)	More than three control deficiencies or significant deficiencies, or one or more material internal control weaknesses reported in the most recent APA audit report.	One to three control deficiencies or significant deficiencies, and no material internal control weaknesses reported in the most recent APA audit report.	No control deficiencies, significant deficiencies or material internal control weaknesses reported in the most recent APA audit report.
FM 3	APA AUDITS: Ensures that material weaknesses, audit points, and management letter comments from APA audits are adequately and promptly addressed and not recurring. Data Source: Comptroller's Quarterly Report	Two or more recurring findings or one material weakness. Exclude recurring findings that are addressed in the agency corrective action plan but	Untimely corrective action plan or one recurring finding. Recurring findings that are addressed in the agency corrective action plan but require more than one year to correct are	No recurring findings, timely corrective action plans. Recurring findings that are addressed in the agency corrective action plan but require more than one year

		require more than one year to correct.	acceptable.	to correct are acceptable.
FM 4	PROMPT PAY: Ensures compliance with the minimal acceptable management standard of 95 percent compliance with the prompt pay act. Data Source: Comptroller's Quarterly Report	Below 95% compliance in last two quarters.	Below 95% compliance during the most recent quarter.	95% or higher compliance during the quarter.
FM 5	DISBURSEMENT POLICIES: Adheres to statewide disbursement policies governing the legal and proper disbursement of state funds, including but not limited to state travel policies. Data Source: Comptroller's Quarterly Report	APA management letter comment regarding compliance with state funds disbursement policies and/or "minimal" or "unacceptable" rating in Comptroller's disbursements	"Satisfactory" rating in Comptroller's disbursements review.	No APA management letter comments regarding compliance with state funds disbursement policies and "good" or "exceptional" rating in Comptroller's
		review.		disbursements review.
	Enterprise Architecture iatives	Below Expectations	Progress Toward Expectations	

				and IT accessibility issues for the disabled.
T2	ENTERPRISE COLLABORATION & IMPROVEMENT: Promotes intra and interagency collaboration, invests agency resources in operational, tactical and strategic enterprise activities and adopts relevant solutions.	Pursues agency-only agenda for performance and improvement. Does not openly encourage greater collaboration or clearly support relevant enterprise solutions.	Progress Towards Expectations: Routinely encourages greater collaboration, occasionally invests agency resources in enterprise activities and sporadically adopts relevant solutions.	Meets Expectations: Volunteers to lead and develop intra- and inter- agency collaboration, routinely invests agency resources in enterprise activities, incorporates new learning into agency planning cycle, adopts all relevant enterprise solutions and tracks ongoing impact to agency operations.
Per	formance Management	Below Expectations	Progress Toward Expectations	Meets Expectations
PM 1	STRATEGIC PLANNING: Develops and documents agency priorities in agency strategic plan and provides for meaningful indicators to assess performance. Plan reflects the priorities of the Governor. Communicates the plan to all managers and staff and posts strategic and service area plans to agency website. Data source: Strategic Plan	No strategic plan or service area plans prepared. If prepared lacks quantifiable objectives. Performance measures are not accurate, appropriate, or understandable. Plan not communicated on website or to agency	Plan reflects priorities of administration. Strategic plan with quantifiable objectives documented and posted on website, but not communicated to all managers and staff in at least two ways within thirty days of development. Some	Plan reflects priorities of administration. Strategic plan with quantifiable objectives documented and posted on website and communicated in at least two ways within thirty days of development to all managers

		administration.	goals than measures.	appropriate, and understandable.
PM 2	COMMUNICATES AGENCY MANAGEMENT PERFORMANCE: Agency implements a plan to publicly communicate its management performance to employees and stakeholders. Agency communicates accurate & timely Management Performance Reports to the Department of Planning & Budget, state oversight entities, the Office of the Secretary and the Office of the Governor. Data source: DPB On-line Performance Report.	No public communication of agency management performance. Management reports are consistently not prepared, often inaccurate or incomplete, are not timely or are not submitted to appropriate officials.	Minimal public communication of agency management performance. Communication of agency management performance does not routinely cover all management categories and only occasionally meets due dates established for reports to DPB, state oversight entities, the Secretary and the Governor. Management reports are not consistently accurate or submitted to appropriate officials in a timely manner.	Public communication of agency management performance is complete and timely. Communication of agency management performance covers all management categories and meets due dates established for reports to DPB, state oversight entities, the Secretary and the Governor. Management reports are consistently accurate and submitted to appropriate officials in a timely manner.
PM 3	ACTS TO CORRECT & ENHANCE AGENCY PERFORMANCE: Agency takes action to correct and improve performance in deficient areas. Documents business conditions, analyses performed, dependencies on external entities, decisions made, actions taken and specific results. Data source: DPB On-line Performance Report and supporting agency documentation.	Agency does not routinely consider its objectives and performance measures as part of its ongoing management process, and does not create the necessary dialog, analysis and action to investigate and correct substandard performance.	Agency routinely considers its planning objectives and performance measures and reports accurately and timely, but does not routinely create the necessary dialog, analysis and action to investigate and correct substandard performance. Does not routinely document or	Agency routinely considers its planning objectives and performance measures and reports accurately and timely. Routinely creates the necessary dialog, analysis and action to investigate and correct substandard performance. Results of actions taken

			track specific performance results for actions that are taken.	are routinely and thoroughly documented and shared with management and staff to create a holistic view of performance and a consistently collaborative approach to solving performance problems.
PM 4	CONTINUITY OF OPERATIONS: Possess, annually update and exercise Continuity of Operations (COOP) plans; annually certify to the Governor that the agency has a COOP plan in place. Data Source: Annual certification summary	Lack of an identifiable agency-wide COOP planning process and written COOP plan.	An identified & instituted COOP planning process within the agency but no written plan.	An identified COOP planning process, a written COOP plan, a documented annual update cycle with an annual COOP training and exercise effort.
	ironmental & Historic	Below	Progress	Meets
	ource Stewardship	Expectations	Toward Expectations	Expectations

NOTE: Participation in DEQ's Environmental Enterprise (E2) program would qualify an agency for "Meets Expectations" for these latter requirements.

Environmental Impact Review process and other similar processes are not routinely followed or are initiated too late for meaningful consideration and resolution where applicable. Selfinspections and reporting do not occur in accordance with state and federal provisions where applicable.

demonstrated where applicable. The Environmental Impact Review process and other similar processes are followed where applicable. Responds to inspection reports, complaints and issues of noncompliance within the prescribed timetable but the agency's compliance record remains inconsistent where applicable.

a consistent basis where applicable. Natural and historic resource issues are fully integrated into agency operations where applicable. The Environmental Impact Review process and other similar processes are followed. Actions to protect resources in agency operations and capital outlay projects are well documented where applicable.

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